

Amendment # \_\_\_\_\_

GENERAL VOTING DAY (YYYY/MM/DD) 2022/10/15			
CANDIDATE'S FULL NAME <b>Mike Zeabin</b>		BALLOT NAME (IF DIFFERENT)	
CANDIDATE'S MAILING ADDRESS <b>Box 564</b>		PHONE NUMBER <b>250-352-7873</b>	
CITY/TOWN <b>Nelson</b>	PROV. <b>BC</b>	POSTAL CODE <b>V1L 5R3</b>	EMAIL (IF AVAILABLE) <b>luranezeabin@yahoo.com</b>
JURISDICTION <b>Nelson BC</b>		OFFICE SOUGHT <b>MAYOR</b>	
ELECTION AREA <b>City of Nelson</b>			
BALLOT NAME OF ENDORSING ELECTOR ORGANIZATION (IF APPLICABLE)			
LEGAL NAME OF ENDORSING ELECTOR ORGANIZATION (IF DIFFERENT)			
<input checked="" type="checkbox"/> Tick if candidate is their own financial agent		<input checked="" type="checkbox"/> Tick if candidate was also a third party sponsor	
FINANCIAL AGENT'S FULL NAME (IF NOT ACTING AS OWN)		EFFECTIVE DATE OF APPOINTMENT (YYYY/MM/DD)	
FINANCIAL AGENT'S MAILING ADDRESS		PHONE NUMBER	
CITY/TOWN	PROV.	POSTAL CODE	EMAIL (IF AVAILABLE)
<b>ZERO CAMPAIGN ACTIVITY</b>		<input type="checkbox"/> Tick if candidate had zero campaign activity	
Candidates with zero campaign activity may file this form only. If any of the conditions <b>are not met</b> , file other forms applicable to the campaign.			
1. No income or deposits, including funds from the candidate, contributions, donations, gifts, loans, funds from previous elections, transfers, etc. 2. No expenses, including signs reused from previous elections, campaign account fees, etc. 3. Did not have a campaign account. 4. Did not change financial agents during this election.			
<b>NOTE - ENDORSED CANDIDATES MUST ALSO INCLUDE A COPY OF THEIR CAMPAIGN FINANCING ARRANGEMENT.</b>			
<b>DECLARATION:</b>			
I, the undersigned, declare that to the best of my knowledge and belief, this disclosure statement completely and accurately discloses the information required under the <i>Local Elections Campaign Financing Act</i> .			
SIGNATURE OF CANDIDATE <b>Mike Zeabin</b>		SIGNATURE OF FINANCIAL AGENT	
DATE (YYYY/MM/DD) <b>2023/01/12</b>		DATE (YYYY/MM/DD)	
<b>WARNING:</b> Signing a false declaration is a serious offence and is subject to significant penalties.			

Please submit your report to Elections BC: [electoral.finance@elections.bc.ca](mailto:electoral.finance@elections.bc.ca)

NAME OF CANDIDATE Mike Zeabin
----------------------------------

<b>INCOME</b>	
Value of campaign contributions from all sources (box <b>A</b> , Form 4302)	<input style="width: 100%;" type="text" value="0.00"/>
Amount of all permissible loans received (box <b>B</b> , Form 4304)	<input style="width: 100%;" type="text" value="0.00"/>
Other income and transfers received (box <b>A</b> , Form 4305)	<input style="width: 100%;" type="text" value="0.00"/>
<b>TOTAL INCOME</b> (sum of above boxes)	<input style="width: 100%;" type="text" value="0.00"/>
 <b>EXPENSES</b>	
Election period expenses (box <b>A</b> , Form 4307)	<input style="width: 100%;" type="text" value="0.00"/>
Campaign period expenses (box <b>B</b> , Form 4307)	<input style="width: 100%;" type="text" value="2,366.69"/>
Election period expenses not subject to limits (box <b>D</b> , Form 4307)	<input style="width: 100%;" type="text" value="0.00"/>
Campaign period expenses not subject to limits (box <b>E</b> , Form 4307)	<input style="width: 100%;" type="text" value="250.00"/>
Other expenses and transfers given (box <b>A</b> , Form 4309)	<input style="width: 100%;" type="text" value="0.00"/>
Balance remaining in campaign account(s) after payment of all expenses (box <b>A</b> , Form 4311)	<input style="width: 100%;" type="text" value="0.00"/>
<b>TOTAL EXPENSES</b> (sum of above boxes)	<input style="width: 100%;" type="text" value="2,616.69"/>

<b>Campaign Account(s)</b>	
NAME OF SAVINGS INSTITUTION	
ADDRESS	
NAME OF SAVINGS INSTITUTION	
ADDRESS	

**SUMMARY OF CAMPAIGN CONTRIBUTIONS**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE  
Mike Zeabin

**Campaign contributions include monetary and in-kind contributions.**  
**Campaign contributions from the candidate must be reported in the same way as contributions from other sources.**  
**Do not include anonymous contributions with contributions less than \$100.**

Number of contributors who gave less than \$100	#	0	Total contributions of less than \$100	\$	0.00
Number of anonymous contributors	#	0	Anonymous contributions	\$	0.00
Total value of contributions of \$100 or more (box A, Form 4303)				\$	0.00
<b>TOTAL CONTRIBUTIONS</b>				\$	0.00 <b>A</b>

**CAMPAIGN CONTRIBUTIONS WITH A TOTAL VALUE OF \$100 OR MORE**  
**LOCAL ELECTIONS CANDIDATE**

NAME OF CANDIDATE  
Mike Zeabin

PAGE 1  
OF 1

**Attach additional forms if necessary.**

FULL NAME OF CONTRIBUTOR	CONTRIBUTOR'S RESIDENTIAL ADDRESS				DATE RECEIVED (YYYY/MM/DD)	CONTRIBUTION AMOUNT	TOTAL OF CONTRIBUTOR'S CONTRIBUTIONS
	ADDRESS	CITY	PROV.	POSTAL CODE			

**SUBTOTAL OF THIS PAGE** 0.00

**TOTAL CONTRIBUTIONS FROM ALL FORM(S) 4303** 0.00 **A**

